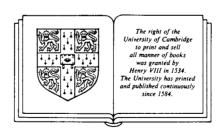
William Hunter

and the eighteenth-century medical world

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INTRODUCTION

For too long William Hunter has been eclipsed in the historical record by his brother John. John Hunter of course deserves fame in his own right, and historians have studied him extensively for his pioneering work on such diverse topics as gunshot wounds, venereal disease, physiological surgery and the nature of the blood. But to some extent John's reputation may less be a reflection of his superior historical importance than of the symbolic meaning his image has come to have. As Jacyna stressed recently, whenever nineteenth-century surgeons felt the need to vindicate their craft, demonstrating its scientific nature, its character as progressive knowledge, its supreme human importance, they invoked John Hunter as founding father and patron saint. And they did so knowing they had a trump card in John's personality: honest, fresh, direct, bluff, full of enthusiasm for knowledge, a tireless seeker after truth.

It is not our intent here to debunk John. Far from it. In fact, Chapter 9, by François Duchesneau, examines John Hunter's significance in the physiological thought of his time. We seek rather to spotlight his elder brother William. A more enigmatic man, indeed; one who, despite his enormous success and rise to fame and riches; despite his notable anatomy school and his thousands of grateful pupils, clearly cut an ambiguous figure in his own times (almost none of his medical colleagues attended his funeral) and failed to capture the imagination of succeeding generations of surgeons and obstetricians, or provide them with a serviceable icon to worship and ideal to emulate. Significantly the Hunterian Society commemorates John, not William. Nor

¹ For a recent assessment of John Hunter, with extensive bibliographical apparatus, see Stephen J. Cross, 'John Hunter, the Animal Economy, and Late Eighteenth Century Physiological Discourse', *Studies in the History of Biology* V (1981), 1–110.
2 L. S. Jacyna, 'Images of John Hunter in the Nineteenth Century', *History of Science* XXI (1983), 85–108.

have scholars treated William generously.³ No full-length, scholarly biography of William has ever appeared, though Peachey's volume is extremely valuable, Sir Charles Illingworth's study is illuminating, and we can now welcome and greatly profit from Helen Brock's edition of Samuel Foart Simmons's eighteenth-century biography.⁴ Nor has any edition of his letters ever been printed (though it is a project on which Helen Brock has been working, which, it is hoped, will shortly see light of day). Moreover, William Hunter's medical and scientific publications have never been reprinted, and his unpublished lecture notes have in general been neglected.⁵

All this is peculiar in view of the fact that William Hunter not only made rather impressive positive contributions to medical knowledge (his work on the lymphatic system was, in his own words, 'the greatest discovery, both in physiology and in pathology, that Anatomy has suggested, since the discovery of the circulation'), but perhaps more significantly played innovatory and influential roles in many of the most critical new trends in medicine during the Enlightenment. His pioneering of the private anatomy school was a key development in the reshaping of British medical education in the era before its domination by the teaching hospital and the university medical school. His insistence on teaching anatomy through direct student dissection of cadavers helped to transform the medico-scientific standing of the surgical profession. His involvement with the plastic and figurative arts performed a similar function, elevating the figure of physician as guardian of culture and presaging the complex dialectic of the arts and sciences so integral to romanticism.6 Finally, William Hunter's enormous eminence and prestige as obstetrician and instructor in the art were crucial in the emergence of midwifery as a preserve of male physicians – a shift significant far beyond medicine itself, since it is a key index of occupational power struggle between the sexes, and male-female rivalry in general in the field of professional services.

In all these fields – medical education, the advancement of surgery, the cultural standing of the medical profession, the particular significance for women's history of the male doctor-female patient rela-

³ For instance, Lester King's pioneering exploration of the eighteenth-century medical world has left William Hunter largely untouched. His *The Medical World of the Eighteenth Century* (Chicago, 1958) contains only three brief references to Hunter.

⁴ George Peachey, A Memoir of William and John Hunter (Plymouth, 1924); Sir Charles Illingworth, The Story of William Hunter (Edinburgh, 1967); S. F. Simmons and John Hunter, William Hunter, 1718–1783, ed. C. H. Brock (Glasgow, 1983).
5 But see the facsimile printing of Charles White's notes on William Hunter's

Lectures of Anatomy (Amsterdam, 1972).

⁶ See Martin Kemp, Dr. William Hunter at the Royal Academy of Arts (Glasgow, 1975).

tionship in obstetrics and gynaecology — William Hunter's importance has been recognised, but only in a rather shadowy way. There are perhaps three important reasons for this. First, there has been a simple lack of information about his life and works. Several of the essays in this collection aim in their distinct ways to remedy this defect. Thus Roy Porter puts Hunter into his entrepreneurial niche; Helen Brock offers the first analysis of that *sine qua non* of Hunter's standing, his wealth; Adrian Wilson gives us a scrutiny of Hunter's unpublished obstetrical lectures; and Ian Rolfe examines Hunter's outlooks on scientific knowledge and his views on the place of life in the cosmos.

Second, Hunter does not really fit into the stereotypes of the medical man or medical scientist with which medical historians commonly work. He was not a university medical professor, a shrewd clinician. the benevolent autocrat of a hospital, or – unlike his contemporary and correspondent Albrecht von Haller - a tireless producer of research papers and textbooks. Neither a Boerhaave, a Cullen, a Haller, a Mead, a Sloane nor an Ashley Cooper - then what sort of a medical man was William Hunter? Several contributors argue that historians often hamper themselves with anachronistic or inappropriate models of medicine, implicitly borrowed from the nineteenth century. Joan Lane shows how important apprenticeship was to the medical world of the eighteenth century; W. F. Bynum and Toby Gelfand show that the London hospital scene of Hunter's day was very different from the picture of High Victorian hospital medicine evoked recently by Jeanne Peterson. ⁷ Edward Shorter demonstrates how we misconstrue the responses of women in labour to the new man-midwife, if we apply the slogans of the present-day feminist rejection of intrusive, hospital-based, 'high-tech' obstetrics. And, for his part, Angus McLaren demonstrates what erroneous views of Enlightenment sexuality we carry away, if we look through the blinkers of our Victorian forebears (though L. J. Jordanova's essay reaffirms the central power of basic traditional sexual stereotyping).

The third reason why it is difficult to put William Hunter in his context is that so much of the background fine texture of eighteenth-century medicine remains to be explored. Compared with medicine in the age of Harvey and the founding of the Royal Society, or with Victorian 'scientific' medicine – medicine after the 'birth of the clinic'8 – the eighteenth century has suffered real neglect. This volume can-

⁷ Jeanne Peterson, *The Medical Profession in Mid-Victorian London* (Berkeley, 1978). 8 The phrase of course is Michel Foucault's, *The Birth of the Clinic*, trans. A. M. S. Smith (London, 1973).

not in itself rectify this situation – though drawing attention to the neglect of major areas of the history of Enlightenment medicine will, it is hoped, stimulate future research efforts. But certain of the contributions, which do not touch directly on the career of William Hunter, do explore major new developments in the broader medical world of the eighteenth century (for example Othmar Keel's wide-ranging examination of eighteenth-century clinical teaching, Christopher Lawrence's chapter on medical education in Edinburgh, and Johanna Geyer-Kordesch's parallel study of German medical education), and so help to illuminate some aspects of this era just before the recognisably 'modern' nineteenth-century medical world.